PTO/SB/01 (10-01)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		Attorney Docket Nur	nber	PARA 49781		
		First Named Invento	r	Cornelis F. du Toit		
		COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number)25,311				
Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date		12/19/2001			
	OR Submitted after Initial	Art Unit	2817	7		
	(37 ČFR 1.16 (e))	Examiner Name				

	Filing	(37 CFR 1.16 (e)) required)	Examiner Name					
As the below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name.								
١	I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
į	WAVEGUIDE TO MICROSTRIP TRANSITION							
				COPY OF PAP ORIGINALLY F				
ı		(Title of the Inv	vention)					
	the specification of which	(,					
	is attached hereto							
	OR							
{	was filed on (MM/DD/YYYY)	12/19/2001	as United Sta	ites Application Number	or PCT International			
	Application Number 10/025,311 and was amended on (MM/DD/YYYY) (if applicable).							
l a	hereby state that I have reviewed and ny amendment specifically referred to	d understand the contents of above.	the above identified	specification, including	the claims, as amended by			
l a	acknowledge the duty to disclose info pplications, material information whicl ternational filing date of the continual	ormation which is material to photographic holds and second available between	patentability as defin the filing date of the	ed in 37 CFR 1.56, inclipion application and th	uding for continuation-in-part e national or PCT			
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
	Prior Foreign Application Number(s)	Country	Foreign Filing Da		Certified Copy Attached? YES NO			
L	Additional foreign application nur	mbers are listed on a suppler	mental priority data s	heet PTO/SB/02B attac	hed hereto:			

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Pietragallo, Bosick & Gordon					
One Oxford Centre, 38th Floor, 36	01 Grant Street				
	 _	PA	15219		
Pittsburgh			10219 ZIP		
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I hereby declare that all statements made herein of a are believed to be true; and further that these state made are punishable by fine or imprisonment, or bot validity of the application or any patent issued thereof	my own knowledge an ments were made wit th, under 18 U.S.C. 10	h the knowledge that willfo	nts made on information and belief ul false statements and the like so		
NAME OF SOLE OR FIRST INVENTOR :	A petition i	nas been filed for this	unsigned inventor		
Given Name Cornelis Frederik (first and middle [if any])		Family Name du Toit or Surname	t		
Inventor's Edulad			Date 04 March 2002		
Ellicott City	MD	US	New Zealand		
Residence: City	State	Country	Citizenship		
9941 Frederick Road					
Ellicott City	MD	21042	us		
City	State	ZIP	Country		
NAME OF SECOND INVENTOR:	A petition ha	s been filed for this ur	nsigned inventor		
Given Name Mangipudi (first and middle [if any])		Family Name Rames	sh		
Inventor's Signature			Date		
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Petaling Jaya Residence: City	State	Country	Citizenship		
Noorworke. Ony		Todanay	Vitizonomp		
Malling Address 695-26-05, Desikiara Conc	lominum, TTDI				
Petaling Jaya	Selangor State	47400 ZIP	Malaysia Country		
Additional inventors are being named on the			TO/SB/02A attached hereto.		
					

PTO/SB/01 (10-01)

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RACE ABATION FOR LITH ITY OR	Attorney Docket Number First Named Inventor		PARA 49781		
DECLARATION FOR UTILITY OR DESIGN			Cornelis F. du Toit		
PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number	10/0	25,311		
Declaration Declaration	Filing Date	12/19/2001			
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit	2817			
Filing (37 CFR 1.16 (e)) required)	Examiner Name				

As the below named inventor, I hereby declare that:						
My residence, mailing address, and	citizenship are as stated beli	ow next to my name.				
I believe I am the original and first inv	ventor of the subject matter v	which is claimed and for whi	ch a patent is soug	ht on the invention entitled:		
WAVEGUIDE TO MIC		OPY OF PAPERS RIGINALLY FILE(30			
	(Title of the I	Invention)				
the specification of which						
is attached hereto						
OR r						
was filed on (MM/DD/YYYY)	12/19/2001	as United States A	pplication Number	or PCT International		
L						
Application Number 10/025,	311 and was amend	ed on (MM/DD/YYYY)		(if applicable).		
I hereby state that I have reviewed an any amendment specifically referred to	d understand the contents on above.	of the above identified speci	ification, including t	he claims, as amended by		
I acknowledge the duty to disclose infapplications, material information which international filing date of the continuational filing date of the continuational filing date.	ch became available betwee					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
		V				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

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Robert P. Lenart Name						
Pietragallo, Bosick & Gordon						
One Oxford Centre, 38th Floor, 30)1 Grant Street					
Pittsburgh		PA	15219			
City		State	ZIP			
United States Country	412-263-4399 Telephone		412-261-0915 Fax			
I hereby declare that all statements made herein of r are believed to be true; and further that these state made are punishable by fine or imprisonment, or bot validity of the application or any patent issued thereor	ments were made wit h, under 18 U.S.C. 1	h the knowledge that will	ful false statements and the like so			
NAME OF SOLE OR FIRST INVENTOR :	A petition I	nas been filed for this	unsigned inventor			
Given Name Cornelis Frederik (first and middle [if any])		Family Name du To	it			
Inventor's Signature			Date			
Ellicott City	MD	US	New Zealand			
Residence: City	State	Country	Citizenship			
9941 Frederick Road						
Ellicott City	MD	21042	US			
City	State	ZIP	Country			
NAME OF SECOND INVENTOR:	A petition ha	s been filed for this ::	nsigned inventor			
Given Name Mangipudi (first and middle [if any])		Family Name or Surname	sh			
Inventor's A. Low			Date 03 05 2002			
Petaling Jaya	Selangor	Malaysia	India			
Residence: City	State	Country	Citizenshlp			
Malling Address 695-26-05, Desikiara Condominum, TTDI						
Petaling Jaya	Selangor State	47400 ZIP	Malaysia Country			
Additional inventors are being named on the			PTO/SB/02A attached hereto.			

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

10/025,311 **Application Number** 12/19/01 Filing Date Cornelis F. du Toit First Named Inventor Waveguide to Microstrip Title **Group Art Unit Examiner Name** PARA 49781 Attorney Docket Number

*Transition					
I hereby appoir	nt:		ر ا		
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Address		Bosick & Gord			
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Country	USA				
Telephone	(412) 263-43	99 F	ax (412)	261-0915	
I am the: X Applicant	/Inventor.				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
	SIGNATURE of A	Applicant or Assigne	e of Record		
Name	Cornelis F. du To	it			
Signature	Edwart				
Date	04 March 2002				
NOTE: Signatures of all t	the inventors or assignees of recording ature is required, see below*.	rd of the entire interest o	r their representativ	e(s) are required. Submit multiple	
M *Total of 2	forms are submitted				

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number 10/025,311

Filing Date 12/19/01

First Named Inventor Cornelis F. du Toit

Title Waveguide to Microstrip

Group Art Unit 2817

Examiner Name

Attorney Docket Number PARA 49781

I hereby appoint: Yeactitioners at Customer Number	*Transition	<u> </u>		1						
Practitioners at Customer Number	I hereby appoi	int:	· · · · · · · · · · · · · · · · · · ·			·				
Assignee of record of the entire interest. See 37 CFR 3.71. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature College Colle	I Practition OR	ners at (•	29694		→ [Number Ba	ar Code		
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number Number Bar Code Label here X Firm or Individual Name Robert P. Lenart Address Pietragallo, Bosick & Gordon Address One Oxford Centre, 38th Floor, 301 Grant Street City Pittsburgh State PA Zip 15219 Country USA Telephone (412) 263-4399 Fax (412) 261-0915 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature Amagipud1 Ramesh Signature On Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Practition	er(s) na	med below:	·			·-···			
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number Robert P. Lenart Address Pietragallo, Bosick & Gordon Address One Oxford Centre, 38th Floor, 301 Grant Street City Pittsburgh Country USA Telephone (412) 263-4399 Fax (412) 261-0915 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipud1 Ramesh Signature O3 05 2002 NOTE: Signatures of at the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple			Name			Registrati	on Number			
business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Practitioners at Customer Number Robert P. Lenart Address Pitragallo, Bosick & Gordon Address One Oxford Centre, 38th Floor, 301 Grant Street City Pittsburgh State PA Zip 15219 Country USA Telephone I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Signature Mangipudi Ramesh Signature Date O3 05 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple				<u>, , , , , , , , , , , , , , , , , , , </u>	+					
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The above-mentioned Customer Number. OR Practitioners at Customer Number Place Customer Number Rumber Bar Code Label here Robert P. Lenart Address Pietragallo, Bosick & Gordon Address One Oxford Centre, 38th Floor, 301 Grant Street City Pittsburgh State PA Zip 15219 Country USA Telephone (412) 263-4399 Fax (412) 261-0915 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipudi Ramesh Signature O3 05 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	as my/our attorn business in the l	ey(s) o United S	agent(s) to prosecute States Patent and Trad	the application i	dentifi nnecte	ied above, a ed therewith.	nd to transa	act al COPY	y of pape inally fi	ER LE
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Practitioners at Customer Number Number Bar Code Label here		mentior	ned Customer Number	•				_		
Robert P. Lenart		s at Cus	stomer Number							
Address Pietragallo, Bosick & Gordon Address One Oxford Centre, 38th Floor, 301 Grant Street City Pittsburgh State PA Zip 15219 Country USA Telephone (412) 263-4399 Fax (412) 261-0915 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipudi Ramesh Signature Mangipudi Ramesh Signature O3 05 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple						La	bel here			
Address One Oxford Centre, 38th Floor, 301 Grant Street City Pittsburgh State PA Zip 15219 Country USA Telephone (412) 263-4399 Fax (412) 261-0915 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipudi Ramesh Signature O3 05 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	I VI	me	Robert P. Len	art		-				
City Pittsburgh State PA Zip 15219 Country USA Telephone (412) 263-4399 Fax (412) 261-0915 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipudi Ramesh Signature Assignee of Record Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Address									
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Telephone (412) 263-4399 Fax (412) 261-0915 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipudi Ramesh Signature O3 05 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple					State	PA	Zip	15219		
I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipudi Ramesh Signature Assignee of Record Date 03 65 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	· · · · · · · · · · · · · · · · · · ·					(/12)	261 0015			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Mangipudi Ramesh Signature O3 65 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple			(412) 263-439	9 1	Fax	(412)	201-0913) 		
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Name Mangipudi Ramesh Signature						3/96).				
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Signature Date O3 05 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple	Name	Mang	ipudi Ramesh							
Date 03 65 2002 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple		9	· · · · · · · · · · · · · · · · · · ·							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		0	3-1-			······································		<u> </u>		
rorms if more than one signature is required, see below*.	NOTE: Signatures of all	the inver	lors or assignees of record	of the entire interest	or thei	r representative	(s) are require	ed. Submit n	nultiple	
Total of2 forms are submitted.						-				

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